



**BUYER NOTIFICATION PROGRAM**  
**RECEIPT OF BUYER NOTIFICATION INSPECTION REPORT**  
*USE ONLY IF BUYER IS AGREEING TO DO THE CODE WORK*

Date: \_\_\_\_\_

**RETURN TO:**

To Whom It May Concern:

City of Allentown  
Building Standards & Safety  
435 Hamilton Street – 3<sup>rd</sup> Floor  
Allentown PA 18101  
Phone: 610.437.7688 fax 610.437.8798  
610.437.7694 fax 610.437.7693

**RE: ACCEPTANCE FORM**

Please sign to certify that you have received a copy of the City of Allentown Buyer Notification Inspection Report.

**THIS FORM MUST BE NOTARIZED TO BE VALID.**

I, \_\_\_\_\_  
Buyer's Signature/ Print Name

Do hereby certify that I have received a copy of and agree to correct the violations cited by the City of Allentown Housing Inspector on the Buyer Notification Report.

At: \_\_\_\_\_  
(Site Location Address)

That such buyer who shall use the premises as their single-family, owner occupied, primary residence shall begin to abate the violations set forth in the Buyer Notification Report within 30 days of taking possession and shall fully comply the premise within six months of taking possession; or All buyers not covered under 1760.05 (2) (b) shall abate the violations set forth in the Buyer Notification Report under the provisions of the City of Allentown Property Rehabilitation and Maintenance Code.

**PRESENT OWNER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**BUYER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

Current Use: a). Rental    b). Owner Occupied                      Future Use: a). Rental    b) Owner Occupied

**Please Circle**

Subscribed and sworn before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public)

My Commission Expires: \_\_\_\_\_

